HUUDA TERRETARIO, COMO VOO 140032 U.S. Palent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperson Reduction Act of 1995, no persons are required to respond to a coffection of information unless & displays a raid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Acological or Doct of Humo Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY (Column 1). OR (Column 1) SMALL ENTITY NUMBER FLED TO FOR HUMBER EXTRA RATE (S) FEE (1) RATE (\$) FEE (1) ASIC FEE HUA NIA 144 375 **355.0**0 17 CFR 1 18(4) [0] @ [C]] N/A **360.00** EARCH FEE NVA MIA 17 CFR 1 16(N). (9. 00 (m)) NA \$250. SECT N/A XAMINATION FEE N/A NUA N/A 17 CFR 1, 16(0), (p), or (q)) \$100 NVA DTAL CLAHAS XI THE FOR HAPP FIRE mnvs 20 = X\$55 84. coo OR DEPENDENT CLAIMS X 17 CFR 1 16(N) minus 3 = X If the specification and drawings exceed 100 **PPLICATION SIZE** sheels of paper, the application size fee due is \$250 (\$125 for small entity) for each T CFR 1 16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR-1.16(a). +100= UNITIPLE DEPENDENT CLAIM PRESENT OF OFR 1 16111 9.00 I the difference in column 1 is less than zero, enter "V" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3): SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (1) ADDI-RATE (1) 106 AFTER PREVIOUSLY EXTRA THONAL TIONAL. AMENDMENT PAID FOR FEE (\$) FEE (1) Total Minus X\$ 25 OI C'A LINE X\$50. **OR** Minus X100 X200 **OR** Application Size Fee (37 CFR 1.16(6)) PRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM DIT OFR 1,160) 4180= 4360s OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (1) ADDI-RATE (\$) ADDI-EXTRA AFTER. PREVIOUSLY TIONAL TIONAL FEE (\$) AMENDMENT PAID FOR FEE (I) Total Minus X\$ 25 X\$50 OR Minus . X100 X200 OR Application Size Fee (37 CFR 1.16(s)) PARST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.16(0)) +360e +180a OR TOTAL ' TOTAL OR ADDI FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

If the Tighest Number Previously Peld For IN THIS SPACE is less than 20, enter "20".

If the Tighest Number Previously Peld For IN THIS SPACE is less than 3, enter "2".

The Highest Number Previously Paid For In THIS SPACE is less than 3, enter T.

The Highest Number Previously Paid For (Total or independent) is the highest number found in the appropriate box in column 1.

Heading of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the pubble which is to file (and by the pubble which is file (and by the pubble which is to file (and by the pubble which is file (and by the pu 186. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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